STATE OF CALIFORNIA
DEPARTMENT OF MOTOR VEHICLES
A Public Service Agency

INFORMATION REQUESTER LOG

REQUESTER CODE

EMPLOYEE'S NAME

Date of Request	Name of Subject	Information Requested*	VR	DL	OL	FR	Purpose of Request	Cross-Reference to Supporting Documents

(Check One)

Keep log in a secure location for two years from date of last request.

***** *Driver License Number, Vehicle Identification Number, Hull Identification Number, Vehicle or Vessel Plate Number*

Confidentiality Notice: The information contained in this log is confidential and any unauthorized access is prohibited.

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